

FOR OFFICE USE ONLY

3319 WALA



(Check all that apply.)

x Change purpose(s) of use

## APPLICATION FOR CHANGE/TRANSFER DEC 27 A10:27 OF WATER RIGHT

For filing with the Department of Ecology or with County Conservancy Boards

## A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

Add purpose(s) of use Change point(s) of diversion/withdrawal Add point(s) of diversion/withdrawal Change/transfer place of use x Other (i.e. consolidation, intertie, trust water)  Explain: Assist in maintaining East Fork Lewis Rv. ba Flow.  **IF MORE SPACE IS NEEDED, ATTACH ADDIT	SEPA: □ Exempt □	C'D//
1. Applicant Information:		
APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Clark Public Utilities	(360) 992-8023	(360) 992-8027
ADDRESS PO Box 8900		
CITY	STATE	ZIP CODE
Vancouver	WA	98668
CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Steve Prather	(360)992-8023	(360)992-8027
ADDRESS		
CITY	STATE	ZIP CODE
S2-*06170 33/9  DO YOU OWN THE RIGHT TO BE CHANGED? □ YES X NO  IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	RECORDED NAME(S)  D. E. and Eldon Turnidge 6	
Perry and Cheryl Gilmour, 14830 NE 379th St., LaCente		360-263-5076
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIV	/E (5) YEARS? x YES NO	
Please attach copies of any documentation that demonstrate was established. Also, if you have a water system play application.  FOR OFFICE APP. NO. 6170 PERMIT NO. 4053 CERT	an or conservation plan, please	include a copy with your
PEET Iliala		was.

date

## 3. Point(s) of Diversion/Withdrawal: SOURCE NO. SEC. TWP. WELL TAG # RGE. PARCEL# N1/2 SE1/4 Swale Cr. 23 T<sub>5</sub>N R<sub>2</sub>E (see attached) **B.** Proposed SOURCE NO. 1/4 1/4 SEC. TWP RGE. PARCEL# WELL TAG # DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL? EXISTING: YES X NO PROPOSED: ☐ YES ☐ NO-IF NO, PROVIDE OWNER(S) NAME: Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment. 4. Purpose of Use: A. Existing **PURPOSE OF USE GPM or CFS** ACRE-FT/YR PERIOD OF USE Irrigation of 92 acres 0.92 cfs April 15 - October 1 B. Proposed **PURPOSE OF USE GPM or CFS** ACRE-FT/YR **PERIOD OF USE** Maintain base flows in East Fork Lewis Rv. 0.92 cfs 5. Place of Use: A. Existing LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: (see attached) PARCEL# # OF ACRES SEC. RGE. COUNTY 1/4 N1/2 92 acres 23 Clark T<sub>5</sub>N R2E (see attached) DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☐ YES X NO - IF NO, PROVIDE OWNER(S) NAME: Perry and Cheryl Gilmour **B.** Proposed LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED: Area served by Clark Public Utilities

# OF ACRES

PARCEL#

☐ NO - IF NO. PROVIDE OWNER(S) NAME:

1/4

SEC.

1/4

TWP.

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES

RGE.

COUNTY

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.
Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?  O YES NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):
6. Remarks and Other Relevant Information:
This transfer of Water Right from Gilmour to Clark Public Utilities is for the purpose of assisting in the maintenance of the base flow in the East Fork of Lewis River and to off set any future impacts to base flow from Clark Public Utilities' future ground water wells.
IF FOR SEASONAL OR TEMPORARY, START DATE/ END DATE/
Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.
Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.
7. Signatures:
I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.
Clark Public Ofilities
(Applicant) 12 101 105
Pure Gold Marrie M.D. 12 12 12 12 12 12 12 12 12 12 12 12 12

**IMPORTANT!** APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION	FOR THE FOLLOWING REASON(S):	
☐ APPLICATION FEE NOT ENCLOSED	MAP NOT INCLUDED or INCOMPLETE	
ADDITIONAL SIGNATURES REQUIRED	☐ SECTION IS INCOMPLETE	
OTHER/EXPLANATION:		
STAFF:	DATE:/	